

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1							
2	1							
3		2						
4		2						
5		2						
6		2						
7		2						
8		2						
9		2						
10		2						
11			1					
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TOTAL IND.	2		2					
TOTAL DEP.	16		16					
TOTAL CLAIMS	18		18					
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TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMDMENTS